2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000017304

FILED Apr 13, 2009 Secretary of State

Entity Nar	me: SUCCES	SSFUL INNOVATIONS, INC.			
Current P	rincipal Plac	e of Business:	New Principal Plac	New Principal Place of Business:	
	SSE PINES DE FER MILLS, M		SUITE 2	1985 SEWARD AVENUE SUITE 2 NAPLES, FL 34109	
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
C/O JOHN M. WICKER, ESQ. PO DRAWER 60205 FORT MYERS, FL 33906			PO DRAWER 6020:	C/O JOHN M. WICKER, P.A. PO DRAWER 60205 FORT MYERS, FL 33906	
FEI Number:	: 26-1982479	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
WICKER, ESQ, JOHN M COSTELLO & ROYSTON, LLP 12670 NEW BRITTANY BLVD, STE 101 FORT MYERS, FL 33907 US				WICKER, JOHN M 12670 NEW BRITTANY BLVD, STE 101 FORT MYERS, FL 33907 US	
	named entity e of Florida.	submits this statement for the	purpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: JOHN M. WICKER				04/13/2009	
Election Car		nic Signature of Registered Ag	ent	Date	
	S AND DIREC	• , ,	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP (BAGOSY, CHF 309 GROSSE) Delete RISTOPHER A	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MCNULTY, BA 309 GROSSE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BAGOSY, KEF 309 GROSSE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DT (MCNULTY, FR 309 GROSSE		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: CHRISTOPHER A. BAGOSY DP 04/13/2009

ROCHESTER MILLS, MI 48309

City-St-Zip: